

Changes to PEBB benefits for 2022

The Public Employees Benefits Board (PEB Board) has approved the following changes **effective January 1, 2022**. The Public Employees Benefits Board (PEBB) Program will provide more information about these and other changes in October before annual open enrollment, November 1 through 30.

Policy resolutions

All changes to PEBB rules that take effect January 1, 2022 will be available at [PEBB rules and policies](#). The PEB Board has passed resolutions that make the following changes:

- To comply with state law, employees can no longer enroll in health plans in both the PEBB Program and the SEBB Program. They may waive enrollment in PEBB medical and dental to enroll in SEBB medical, but only if they are also enrolled in SEBB dental and vision.
- All eligible employees will be **automatically enrolled in** an employee-paid LTD plan that covers 60 percent of their monthly predisability income (up to \$16,667), with a 90-day benefit waiting period. During annual open enrollment, employees can reduce to a lower-cost 50-percent coverage level with a maximum monthly benefit of \$8,333, depending on income, reduced by any deductible income, or they can decline the coverage. If an employee later decides to enroll in or increase coverage, they will have to provide evidence of insurability and be approved by the insurer.
- Retirees no longer need to stay enrolled in dental for two years. They can now choose whether to enroll in or end dental coverage each year.
- Retirees who defer (pause or postpone) PEBB coverage can now have a gap of up to 31 days between qualifying medical coverages. This rule change will make it easier for retirees to return to PEBB retiree insurance coverage after a deferral.

Other changes coming in 2022

- The IRS raised the health savings account (HSA) annual maximum contribution to \$3,650 for single subscribers and \$7,300 for families.
- The cost of supplemental (employee-paid) life insurance will increase by about 5 percent. The change applies to coverage for employees and coverage for spouses or state-registered domestic partners.
- If a state or higher education employee enrolls in a Medical Flexible Spending Arrangement (FSA) for 2022, they will be able to carry over funds in 2023, rather than have a grace period to spend down funds. To receive carryover in January 2023, you must enroll again in a Medical FSA for 2023 or have at least \$120 remaining in your 2022 balance. Any funds above \$550 will be forfeited. For 2022, the Medical FSA minimum annual election is also decreasing from \$240 to \$120.
- State and higher education employees who enroll in a consumer-directed health plan (CDHP) with a health savings account (HSA) will have access to a new benefit: the Limited Purpose FSA. It allows you to set aside pre-tax funds for dental and vision expenses, saving more of your HSA funds for medical expenses. You can choose to set aside between \$120 and \$2,750 for 2022.
- The \$25 Amazon.com gift card incentive for completing the SmartHealth well-being assessment is ending and will no longer be available in 2022 for most SmartHealth users.



Kaiser Permanente of the Northwest (KPNW) will:

- Change naturopath visits from specialty care (requiring a referral) to primary care, allowing members to self-refer.
- Allow members to self-refer for acupuncture, up to 12 visits per year. For provider referrals, members have unlimited visits.
- Allow members to self-refer for massage therapy, up to 12 visits per year.
- Allow members to self-refer for physical, speech, and occupational therapy, up to a combined 60 visits per year. Members will not need prior authorization.
- Add coverage for routine dental services for members who have been referred for an organ transplant.
- Lower the member's maximum out-of-pocket cost for each insulin prescription fill from \$100 to \$75.
- Add PeaceHealth Southwest Medical Center as an in-network provider.

Kaiser Permanente of Washington (KPWA) will:

- Add in-home infusion therapy through network providers. You will not pay coinsurance for administration of infused medication. A cost share is required for prescription drugs. CDHP members must meet their annual deductible before coverage begins.
- Cover two urine drug screenings in full per year (not subject to the annual deductible).
- The network status of several large providers may change for 2022, including — at the time of this publication — the removal of Kittitas Valley Medical Center as an in-network provider. As open enrollment approaches, please confirm network provider status by calling KPWA at 1-866-648-1928 (TTY: 1-800-833-6388).



Uniform Medical Plan will:

- Remove the member coinsurance for inpatient mental health and substance use disorder services for UMP Classic, UMP Select, and UMP Plus. UMP Consumer-Directed Health Plan [CDHP] had no coinsurance for these services, so no change was required.
- Allow subscribers who switch to a different UMP plan during a special open enrollment to keep the amounts already accrued toward their annual deductibles, out-of-pocket maximums, and benefit or visit limits.
- Remove Thurston County from the UMP Plus–Puget Sound High Value Network service area. (UMP Plus–UW Medicine Accountable Care Network will still be available in Thurston County.)
- Cover an expanded list of preventive care benefits for certain chronic conditions for UMP CDHP members without having to pay the annual deductible.
- Allow up to 24 visits for chiropractic, 24 visits for acupuncture, and 24 visits for massage therapy per year. If you see a preferred or network provider, you will pay a \$15 copay per visit. There is no out-of-network coverage for massage therapy. UMP CDHP members must meet their deductible first.
- Cover continuous glucose monitors (CGMs) under the pharmacy benefit (instead of the medical benefit). If you are currently receiving CGMs through the medical benefit, you will need a prescription from your provider to receive them through a network pharmacy.
- Medicare will be the primary payer for UMP members who are dependents of an employed state-registered domestic partner. Medicare will stay the secondary payer for members age 65 and over who have UMP coverage due to their own employee status or a spouse's employment status (regardless of the spouse's age).

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2022 monthly premiums

The PEB Board approved the following monthly premiums for 2022. All figures are rounded to the nearest dollar.

State agency and higher education employees

Employees who work for an educational service district, city, tribal government, county, port, hospital, etc., must contact their payroll or benefits office to get their monthly premiums.

	Subscriber		Subscriber & Spouse ¹		Subscriber & Children		Subscriber, Spouse ¹ , & Children	
	2021	2022	2021	2022	2021	2022	2021	2022
Kaiser Permanente NW Classic ²	\$159	\$159	\$328	\$328	\$278	\$278	\$447	\$477
Kaiser Permanente NW CDHP ²	\$25	\$26	\$60	\$62	\$44	\$46	\$79	\$82
Kaiser Permanente WA Classic	\$189	\$204	\$388	\$418	\$331	\$357	\$530	\$571
Kaiser Permanente WA CDHP	\$26	\$24	\$62	\$58	\$46	\$42	\$82	\$76
Kaiser Permanente WA SoundChoice	\$55	\$50	\$120	\$110	\$96	\$88	\$161	\$148
Kaiser Permanente WA Value	\$112	\$113	\$234	\$236	\$196	\$198	\$318	\$321
UMP Classic	\$105	\$110	\$220	\$230	\$184	\$193	\$299	\$313
UMP Select	\$37	\$39	\$84	\$88	\$65	\$68	\$112	\$117
UMP CDHP	\$25	\$24	\$60	\$58	\$44	\$42	\$79	\$76
UMP Plus	\$72	\$78	\$154	\$166	\$126	\$137	\$208	\$225
Subscribers may also have to pay the following premium surcharges.								
Tobacco Use Surcharge	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Spouse ¹ Coverage Surcharge	N/A	N/A	\$50	\$50	N/A	N/A	\$50	\$50

¹or state-registered domestic partner

²Kaiser Foundation Health Plan of the Northwest offers plans in Clark and Cowlitz counties in Washington and select counties in Oregon.

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2022 monthly premiums: non-Medicare retirees

All figures are rounded to the nearest dollar.

	Subscriber		Subscriber & Spouse ¹		Subscriber & Children		Subscriber, Spouse ¹ , and Children	
	2021	2022	2021	2022	2021	2022	2021	2022
Kaiser Permanente NW Classic ²	\$746	\$768	\$1,486	\$1,531	\$1,301	\$1,341	\$2,041	\$2,104
Kaiser Permanente NW CDHP ²	\$619	\$644	\$1,226	\$1,277	\$1,089	\$1,133	\$1,638	\$1,708
Kaiser Permanente WA Classic	\$775	\$813	\$1,545	\$1,621	\$1,353	\$1,419	\$2,123	\$2,228
Kaiser Permanente WA CDHP	\$619	\$641	\$1,228	\$1,273	\$1,090	\$1,130	\$1,641	\$1,703
Kaiser Permanente WA SoundChoice	\$641	\$659	\$1,277	\$1,313	\$1,118	\$1,150	\$1,754	\$1,804
Kaiser Permanente WA Value	\$699	\$722	\$1,392	\$1,439	\$1,219	\$1,260	\$1,912	\$1,976
UMP Classic	\$692	\$719	\$1,378	\$1,432	\$1,206	\$1,254	\$1,892	\$1,968
UMP Select	\$623	\$648	\$1,241	\$1,290	\$1,087	\$1,130	\$1,705	\$1,773
UMP CDHP	\$619	\$639	\$1,226	\$1,270	\$1,089	\$1,127	\$1,638	\$1,700
UMP Plus	\$659	\$687	\$1,312	\$1,369	\$1,149	\$1,199	\$1,802	\$1,881
Subscribers may also have to pay the following premium surcharges								
Tobacco Use Surcharge	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Spouse ¹ Coverage Surcharge	N/A	N/A	\$50	\$50	N/A	N/A	\$50	\$50

¹or state-registered domestic partner

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2022 monthly premiums: Medicare retirees

Medicare retiree premiums for subscriber & spouse/state-registered domestic partner; subscriber & children; and subscriber, spouse/state-registered domestic partner, & children will be available in mid-October on the HCA website at hca.wa.gov/pebb-oe and in the customized letter retirees will receive with their October newsletter.

	Subscriber	
	2021	2022
Kaiser Permanente NW Senior Advantage	\$174.41	\$172.79
Kaiser Permanente WA Classic	\$177.10	\$175.69
Kaiser Permanente WA Medicare Advantage	\$177.10	\$175.69
Premera Medicare Supplement Plan F (Disabled)	\$200.34	\$199.77
Premera Medicare Supplement Plan F (Retired)	\$116.68	\$116.11
Premera Medicare Supplement Plan G (Disabled)	\$165.96	\$165.39
Premera Medicare Supplement Plan G (Retired)	\$99.92	\$99.35
UMP Classic	\$336.30	\$364.87
UnitedHealthcare PEBB Balance	\$132.93	\$125.99
UnitedHealthcare PEBB Complete	\$156.81	\$148.68